



Training programming for
healthcare professionals:
How to support patients with
chronic diseases to self-manage
their health?

EXECUTIVE SUMMARY

of the abridged ETMI report

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PROBLEM

There are many existing definitions for self-management in literature. However, they all converge toward the idea that beyond knowledge transfer, interventions must promote the active involvement of patients to ensure that they participate in their care plan (Jonkman, 2016). Generally, support to self-management aims at informing the person who is living with a chronic disease about their condition and helping them develop the necessary skills to manage the physical, emotional, and social effects (Fournier et Murphy, 2016).

Different studies evaluating the effectiveness of self-management interventions in chronic disease for patients show that they are heterogeneous, complex, and multimodal (Health Information and Quality Authority, 2015; Jonkman, 2016; Kumah, Sciolli, Toraldo et Murante, 2018; Massimi et al., 2017; Pinnock et al., 2017; Stenberg, Haaland-Øverby, Fredriksen, Westermann et Kvisvik, 2016; Taylor et al., 2014). As for healthcare professionals, most of them need to be trained and to acquire the necessary skills to be able to apply efficient self-management support techniques (Canadian Council on Health, 2012). This highlights the relevance of training them so that they can offer adequate support to patients who take charge of their disease.

CONTEXT

Chronic diseases are long-term illnesses whose management require active participation from patients on the self-management of their treatment, while being accompanied by healthcare professionals. However, how to support patients in self-management of their condition is a significant challenge for professionals. Throughout the Quebec city region (region 03), three establishments have the responsibility to support people with chronic disease on a regional level thanks to a network of integrated services. We refer here to the *Centre hospitalier universitaire de Québec-Université Laval*, *l'Institut universitaire de cardiologie et de pneumologie-Université Laval* and the *Centre intégré universitaire de la santé et des services sociaux de la Capitale-Nationale*.

As part of their work on chronic disease, the Nursing Department and the Department of Multidisciplinary Services of the CIUSSS de la Capitale-Nationale have agreed on the need to shift toward a self-management approach, which include an active involvement of patients. It is in this context that the *Unité d'évaluation des technologies et des modes d'intervention en santé et en services sociaux du CIUSSS de la Capitale-Nationale* was contacted by the representatives of these three establishments. The UETMISSS's objective in this mandate consists in identifying new and efficient ways to teach the self-management of chronic disease to healthcare professionals so that they can adequately support patients as they take charge of their health.

OBJECTIVE

The current evaluation of technologies and intervention modes (*évaluation des technologies et des modes d'intervention (ETMI)*) aims at identifying the efficient strategies to teach self-management to healthcare professionals who must support patients with chronic diseases in taking charge of their health.

For more information, please see the report at:

Programmes de formation s'adressant aux professionnels de la santé : comment soutenir les usagers atteints de maladies chroniques à l'autoprise en charge de leur santé?

METHODOLOGY

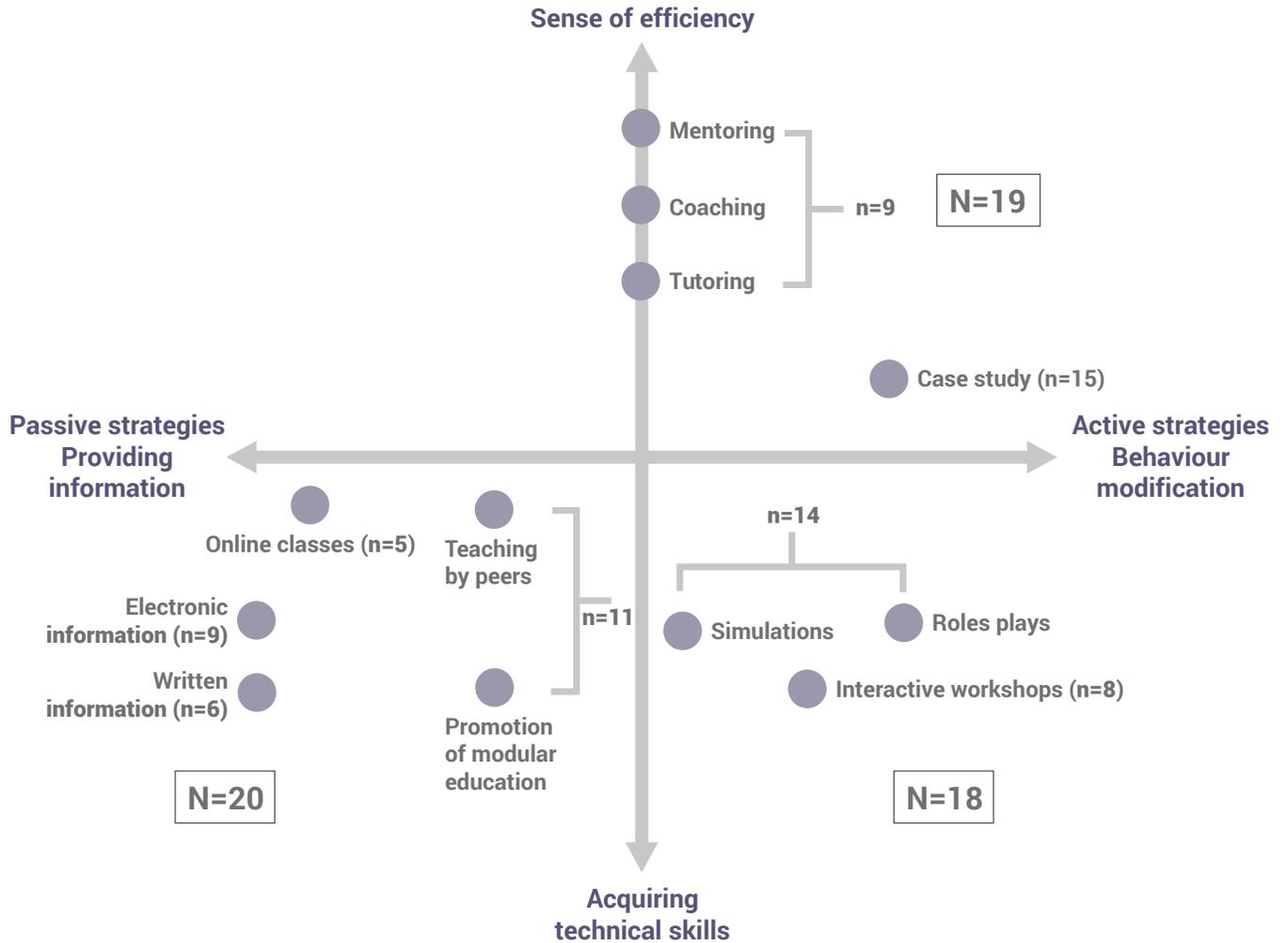
A literature review using a systematic approach was done in the MEDLINE, Embase, CINHALL and PsycINFO databases to identify relevant literature published between January 2009 and August 2019. Studies were chosen based on the PICOTS criteria, and the methodological quality of the included studies was evaluated using the Quallsyst tool (Kmet et al, 2004). Relevant data were collected in a structured extraction sheet, synthesized, and analyzed according to an analysis framework.

RESULTS

The literature search identified 13 011 articles, 26 of which were retained. A total of 26 training programs for professionals on self-management were identified. However, these programs are heterogeneous, aimed at different chronic health problems and use distinct training methods.

Most of the identified training programs (23/26) use multimodal teaching strategies, i.e., using more than one strategy at a time. As shown in Figure 1, 20 of these programs highlight strategies of passive information sharing (online classes, teaching, written and electronic information), whereas 18 programs favor the use of active strategies based on behavioral modification (interactive workshops, role play, simulations). The strategies used in these programs highlight the acquisition of technical skills, but 19 programs also use training strategies fostering the development of a sense of efficiency (coaching, mentoring, tutoring, case studies). Almost half of these programs have training content on motivational interviewing or behavioral change.

Figure 1 : Strategies identified according to the analytical framework



Adapted from de Brahimi (2011) & de Silva (2011)

All identified training programs had positive effects on professionals. Linked to a high level of evidence, some of these programs help to increase the skills, care practices and knowledge of professionals. These professionals also develop stronger confidence in their skills to support patients and improve their attitudes and beliefs regarding self-management. More results, associated to a moderate level of evidence, suggest that trained professionals improve their communication and teaching skills, as well as the quality of care that they give. They also use, or intend to use, the learned strategies.

FINDINGS

In view of these data, it is possible to make the following observations:

- › All the training programs identified led to an improvement in the professionals for at least one category of measured variables related to supporting self-management of chronic disease in patients:
 - Associated to a high level of evidence: Improvement in care practices, increased knowledge and more confidence from the professionals in their skills to support patients in the self-management of their chronic diseases;
 - Associated to a moderate level of evidence: Improvement of communication and teaching skills in professionals, adequate prescription of medication, quality of care as well as improved attitude and beliefs regarding self-management. Trained professionals also apply or have the intention of using learned strategies.
- › Most of the identified training programs for professionals (23/26) used multimodal teaching strategies integrating passive and active strategies focusing on acquiring technical skills as well as improving their personal sense of efficiency:
 - The strategies most often used in the identified programs are case discussions, role plays and different forms of teaching (didactic, theoretical, technical, modular, through peers);
 - The multimodality and heterogeneity of the training programs does not make it possible to evaluate the efficiency of any one particular strategy.
- › More than half the identified programs (17/26) are comprised of training or a training module based on a motivational approach or on a behavioral change approach. These approaches suggest that training based on patient needs, working on the elements that they qualify as priorities and for which they are truly motivated to act upon, could foster self-management of their health.

Strengths and limitations

Results of this ETMI have certain limitations. First, the heterogeneity of identified training programs makes comparison difficult. Program descriptions are unequal and vary between studies. Some of the reported information is fragmented or unclear. Moreover, a number of measured variables and their nature are different, depending on the study. Certain categories of variables, such as acquiring caregiving practices are studied more but with different ways to measure them. Also, the use of multimodal strategies in most programs does not permit to evaluate the efficiency of one particular strategy. The absence of grey literature search is also a limitation that is worth mentioning. Certain relevant documents could have been missed due to this methodological choice. However, the methodological quality of the retained studies is relatively high, which adds value to the results.

CONCLUSION

Results of this ETMI show that self-management training programs are profitable to healthcare professionals who must support patients in the self-management of their chronic diseases. In fact, these improvements are significant to the skills, confidence, and attitudes of professionals regarding self-management and using learned strategies in their work with patients. Finally, using several teaching strategies at once in the same training program seems relevant to supporting the learning experience of professionals who support patients in the self-management of their chronic disease. It is essential to continue evaluating these practices to better understand their impact.

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